## **Application Data Sheet**

## **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: METHODS OF MEASURING THE ABILITY

OF A TEST COMPOUND TO INACTIVATE
A BIOLOGICAL TARGET IN CELLS OF A

**SUBJECT** 

Attorney Docket Number:: PPI-144

Request for Early Publication?:: No

Request for Non-Publication?:: No

Total Drawing Sheets:: 5

Small Entity?:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Dennis

Family Name:: BENJAMIN

City of Residence:: Acton

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 8 Beverly Road

City of mailing address:: Acton

MA State or Province of mailing address::

Postal or Zip Code of mailing address:: 01720

**Applicant Authority Type:**: Inventor

Primary Citizenship Country:: US

Status:: **Full Capacity** 

Given Name:: Charles

Family Name:: **THOMPSON** 

City of Residence:: Stowe

State or Province of Residence:: MA

Country of Residence:: US

State or Province of mailing address:: MA

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

Status:: **Full Capacity** 

Wayne

Given Name:: Bryan

Family Name:: **WANG** City of Residence::

State or Province of Residence:: PA

Country of Residence:: US

State or Province of mailing address:: MA

**Applicant Authority Type:**: Inventor

Primary Citizenship Country:: US

Status:: **Full Capacity** 

Given Name:: James

WAKEFIELD Family Name::

City of Residence:: Arlington

State or Province of Residence:: MA

Country of Residence:: US State or Province of mailing address:: MA

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Malcolm

Middle Name:: L.

Family Name:: GEFTER

City of Residence:: Lincoln

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 46 Baker Bridge Road

City of mailing address:: Lincoln

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 01773

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Christopher

Middle Name:: C.

Family Name:: ARICO-MUENDEL

City of Residence:: West Roxbury

State or Province of Residence:: MA

Country of Residence:: US

State or Province of mailing address:: MA

**Correspondence Information** 

Correspondence Customer Number:: 00959

**Representative Information** 

Representative Customer Number::

00959

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/460920	04/07/03